Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name TOMO RESTAURANT INC.					Telephone Number	Date of Inspection	ID#	
Address 4317 CHARLESTOWN ROAD, NEW ALBANY IN 47150					Est (812) 941-0200 Own 502-526-8128	09/09/2020		
Owner YOUN C. CHOI					Purpose X Routine	Follow Up 09/16/2020	Released 09/09/2020	
Owner's Address 4526 BILES COURT LOUISVILLE, KY 40241					Follow-up Complaint			
Person in Charge JESUS GARCIA					Pre-Operational			
Responsible Person's Email					Temporary HACCP	Menu Type 1 2 3 _X	Menu Type 1 2 3 <u>X</u> 4 5	
Certified Food Handler SEAN A. TUCKER					Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section #	n # C NC R Narrative To Be Corrected							
116 136 344 345 438 234 245 297 297 310 347 416	X X X X	x x x x x x	Observed multip Observed (2) op Observed bar ha Observed food d Observed (2) ch Observed ice so Observed rags o Observed bar so Observed tea fill Observed kitche Observed no har	Observed multiple kitchen staff without mandated face coverings. Observed (2) open employee drinks on prep spaces. Observed bar handsink blocked by utensil basket. Observed food debris in sushi and server station handsink. Observed (2) chemical sprayers lacking common name label. Observed ice scoop inappropriately stored in bar ice bin. Observed rags outside of sanitzer/allowed to dry. Observed bar soda gun to be moldy. Observed tea filter bulb to be rusty. Observed kitchen ceiling exhaust to be dusty. Observed no hand drying provisions at server station handsink. Observed dead bugs in kitchen light shields.				
Summary of Violations C <u>4</u> NC <u>8</u> R <u>0</u>								
Received by (na		tle prin	ted):		Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (signature):					Inspected by (signature):			
cc:				cc:		cc:		